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UTILITY
PATENT APPLICATION
TRANSMITTAL
Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	00862.023435
First Name	ed Inventor or Application Identifier

NORIHIRO KAWATOKO

Express Mail Label No.		14 3 01 5 4	
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APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADD	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
1. X Fee Transm (Submit an or	original, and a duplicate for fee processing)			7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
2. Applicant cla See 37 CFR	Claims small entity status. R 1.27. 8. Nucleotide and/or Amino Acid (if applicable, all necessary)				Sequence Submission	
3. X Specification	n Total Pa	ges 42		a. Co	mputer Readable	Form (CRF)
4. X Drawing(s) ((35 USC 113) Total Sh	eets 20		· —	on Sequence List D-ROM or CD-R	
5. X Oath or Dec						
a. X N	ewly executed (original or co	ру)				j identity of above copies
	opy from a prior application (ANYING APPLIC	
i.	DELETION OF INV	• ,	9. X 10.	37 CFR 3.73(b		Power of Attorney
	-	plication, see 37 CFF	` '	English Trans	slation Document	(if applicable)
6. X Application Data Sheet. See 37 CFR 1.76		12.	Information Di Statement (ID		Copies of IDS Citations	
			13.	Preliminary Ar	mendment	
			14. X		ot Postcard (MPE pecifically itemized	
			15.	Certified Copy	of Priority Docur	ment(s)
			16.	O45		
17. If a CONTINUING	APPLICATION, check app	ropriate box and sup	oply the requisite	nformation:		
Continuation Prior application informa		Continuatio	n-in-part (CIP)	of prior applica Group/Art Unit:		
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
		18. CORRE	SPONDENCE ADI	PRESS		
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below			pondence address below			
NAME						
Address						
City		State			Zip Code	
Country	<u> </u>	Telephone	L		Fax	



CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	12-20 =	0	X \$ 18.00 =	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	4-3 =	1	X \$ 86.00 =	\$86.00
	MULTIPLE DEPENDEN	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$290.00 =	\$0.00
				BASIC FEE (37 CFR 1.16(a))	
			Total of	above Calculations =	\$856.00
	Reduction by	50% for filing by small er	ntity (Note 37 CFR 1.9,	1.27, 1.28).	
				TOTAL =	\$856.00
19. Sm a.		ntity statement is enclose			
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a. b. c. 20. 21.	A small en A small en A small en and desire Is no long X A check in the amount A check in the amount Commissioner is hereb O6-1205: X Fees requ	ntity statement was filed and bed. er claimed. ount of \$ 856.00 to count of \$ 40.00	in the prior nonprovision cover the filing fee is end cover the recordal fee is	closed. enclosed.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Mark A. Williamson - Reg. No. 33,628	
SIGNATURE	Machani	
DATE January 27, 2004		

MAW/kkv

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